

Foster Family Home - Corrective Action Report

Provider ID: 1-090086

Home Name: Precy Villanueva, CNA

99-058 Ohiaku Street

Aiea HI 96701

Review ID: 1-090086-12

Reviewer: Maribel Nakamine

Begin Date: 10/22/2020

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

Recertification inspection for a 3 person CCFFH completed.

Corrective Action Report issued during inspection with all items due to CTA within 30 days.

6.(d)(1)- see applicable sections of the review

Foster Family Home Reporting Changes [11-800-12]

12.(4) In the household composition or structure of the home; and

Comment:

12.(4)- Primary Caregiver Disclosure form was not updated to reflect the total numbers of household members.

Foster Family Home Quality Assurance [11-800-50]

50.(e) The home shall be subject to investigation by the department at any time. The investigation may be announced or unannounced and may include, but is not limited to, one or more of the following:

50.(e)(2) Inspection of service sites;

Comment:

50.(e), (e)(2)- CCFFH has a locked gate and multiple barking dogs from the inside- no doorbell buzzer/intercom seen on the outside of the gate.

Foster Family Home Client Rights [11-800-53]

53.(a) Written policies and procedures regarding the rights of the client during the client's stay in the home shall be established and a copy shall be provided to the client, or the client's legal representative, and made available to the public when requested.

53.(b)(1) Be fully informed, prior to or at the time of admission, of these rights and of all rules governing the client's conduct in the home. There shall be documentation signed by the client or the client's legal representative that this procedure has been carried out;

Comment:

53.(a), 53.(b)(1)- No completed Admission Policy and Agreement seen in CCFFH binder for Client #1, Client#2, and Client #3 upon admission to CCFFH.

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Foster Family Home

Records

[11-800-54]

54.(b) The home shall maintain separate notebooks for each client in a manner that ensures legibility, order, and timely signing and dating of each entry in black ink. Each client notebook shall be a permanent record and shall be kept in detail to:

54.(c)(2) Client's current individual service plan, and when appropriate, a transportation plan approved by the department;

Comment:

54.(b)- Client #3's chart/binder was disorganized- no tabs seen to separate each sections, documents were out of context, etc.

54.(c)(2)- Client #2's Service Plan expired on 8/7/2020.

Maribel Nakawine, RN

Compliance Manager

[Signature] *SCG* *PU*

Primary Care Giver

10/22/2020

Date

10/22/20

Date

CTA RN Compliance Manager: Teri Van Houten

**Community Care Foster Family Home (CCFFH)
Written Corrective Action Plan (CAP)
Chapter 11-800**

PCG's Name on CCFFH Certificate: Precy Villanueva

(PLEASE PRINT)

CCFFH Address: 99 058 Ohiaku St. Aiea HI 96701

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
12.(4)	Filled out and updated the Primary Caregiver Disclosure form.	11/17/20	Make sure to update the Primary Caregiver Disclosure form yearly to accurately reflect the total number of household members
50.(e)	A doorbell with an intercom was installed by the front gate.	11/17/20	Check doorbell regularly to ensure that the doorbell is visible and in working conditions.
53.(a)	Reviewed the CCFFH binders for Client #1, Client #2 and Client #3 and ensured that the Admission Policy and Agreement forms were filled out, filed in the binders and copies were made.	11/17/20	Ensure that the family and representative sign the Admission Policy and Agreement on the same day. Also file each form into CCFFH client binders and make copies of forms immediately.
54.(b)	Client #3's CCFFH binders were reorganized with tabs to separate each section.	10/29/20	Check binders regularly to ensure that binders, charts and documents are organized.
54.(c)	Updated Client #2's Service Plan.	10/29/20	Regularly check dates and documents to make sure that Service Plans are up to date.

☒ All items that were fixed are attached to this CAP

PCG's Signature: _____

Date: 11/17/20

☒ CTA has reviewed all corrected items